FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response	. 0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Filed p	T OF CHANGES IN BENEFICIAL OWNI rursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940
Name and Address of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol <u>CrowdStrike Holdings, Inc.</u> [CRWD]

Name and Address of Reporting Person* Schumacher Laura J					2. Issuer Name and Ticker or Trading Symbol CrowdStrike Holdings, Inc. [CRWD]										licable)	ng Perso	Person(s) to Issuer 10% Owner	
(Last)	(Fir	/	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/20/2023								Office	er (give title		Other (below)	specify	
C/O CROWDSTRIKE HOLDINGS, INC. 206 E. 9TH ST., STE. 1400					4. If Amendment, Date of Original Filed (Month/Day/Year)								ne)	vidual or Joint/Group Filing (Check Applicable				··
(Street) AUSTIN TX 78701												X		filed by Mo	led by One Reporting Person led by More than One Reporting			
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - Noi	n-Deriva	tive S	ecui	rities Acq	uired,	Disp	osed of	, or Be	nefici	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Executio ay/Year) if any		cution Date,	Transaction Disposed Code (Instr. 5)		4. Securition Disposed (5)			4 and Securit Benefic Owned		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	.	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Class A c	ommon sto	ck		12/20/	2023			A		44(1)	Α	\$0 7,744(2)			Γ)		
		Tal					ies Acqui varrants,							wne	d			
1. Title of Derivative Security 1. Title of Conversion Date Exercise Price of Derivative Security 1. Title of Date Exercise (Month/Day/Year) 1. Title of Date Execution Date, if any (Month/Day/Year) 1. Title of Date Execution Date, if any (Month/Day/Year)		on Date,	4. Transac Code (Ir 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expirati	5. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of vative urity r. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Ov Fo Dii or (I)	vnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

1. The shares represent fully-vested restricted stock units ("RSUs") issued in lieu of quarterly cash retainer(s) payable under the issuer's Outsider Director Compensation Policy. The RSUs immediately converted into shares of the issuer's Class A Common Stock.

(A) (D) Date Exercisable

2. Includes shares to be issued in connection with the vesting of one or more RSUs.

/s/ Remie Solano, Attorney-in-12/21/2023

Amount Numbe

of Shares

Title

Fact

Expiration Date

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.